

APPLICATION DATA SHEET

Application Information

Application Number:: N/A
Filing Date:: December 12, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?::
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CFR)?::
Number of Copies of CFR::
Title:: BLOW CYLINDER WITH FLUID CUSHION
Attorney Docket Number:: 29953-187825
Request for Early Publication?::
Request for Non-Publication?::
Suggested Drawing Figure:: 2
Total Drawing Sheets:: 2
Small Entity?::
Latin Name::
Variety Denomination Name::
Petition Included?::
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship:: U.S.A.
Country:: U.S.A.
Status:: Full Capacity
Given Name:: Marshall
Middle Name::
Family Name:: MILLER
Name Suffix::
City of Residence:: York
State or Province of Residence:: Pennsylvania
Country of Residence:: U.S.A.
Street of Mailing Address:: 505 E. 3rd Street
City of Mailing Address:: Oil City
State or Province of Mailing Address:: Pennsylvania
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 16301

Applicant Authority Type:: Inventor
Primary Citizenship:: U.S.A.
Country:: U.S.A.
Status:: Full Capacity
Given Name:: Bernie
Middle Name::
Family Name:: KLINGENMAIER
Name Suffix::
City of Residence:: York
State or Province of Residence:: Pennsylvania
Country of Residence:: U.S.A.
Street of Mailing Address:: 3120 Skylight Drive West

City of Mailing Address:: York
State or Province of Mailing Address:: Pennsylvania
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 17402

Applicant Authority Type:: Inventor
Primary Citizenship::
Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of Mailing Address::
City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship::
Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

**State or Province of Mailing
Address::**

Country of Mailing Address::

**Postal or Zip Code of Mailing
Address::**

Correspondence Information

**Correspondence Customer
Number::** 26694

Phone Number:: 202-344-4000

Fax Number:: 202-344-8300

E-Mail Address:: KGHADDAWAY@VENABLE.COM

Representative Information

**Representative Customer
Number::** 26694

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Dat :: |
|----------------------|--------------------------|---------------------------------|-----------------------------|
| | Continuation of | | |
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| | Continuation of | | |
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Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
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Assignee Information

Assignee Name:: Graham Packaging Company L.P.
Street of Mailing Address:: 2401 Pleasant Valley Road
City of Mailing Address:: York
State or Province of Mailing Address:: PA
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 17402